

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

Commonwealth of Massachusetts	20 JUL 28 File with: City or Town Clerk or Electron Edminission
Fill in Reporting Period dates: Beginning Date: 01/01/2	
Type of Report: (Check one)	
☐ 8th day preceding preliminary 8th day preceding election [30 day after election year-end report dissolution
Candidate Full Name (if applicable)	Walpole United PAC Committee Name
Candidate I un (Vanie (11 applicable)	Donna Donnellan
Office Sough: and District	Name of Committee Treasurer
Residential Address	32 Hitching Post Drive, Walpole, MA 02081 Committee Mailing Address
E-mail:	E-mail. walpoletaxpayers@gmail.com
Phone # (optional):	Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	\$1,583.08
Line 2: Total receipts this period (page 3, line 11)	\$0.00
Line 3: Subtotal (line 1 plus line 2)	\$0.00
Line 4: Total expenditures this period (page 5, line	e 14) \$561.59
Line 5: Ending Balance (line 3 minus line 4)	\$1,021.49
Line 6: Total in-kind contributions this period (page	so.00
Line 7: Total (all) outstanding liabilities (page 7)	\$0.00
Line 8: Name of bank(s) used: Rockland Federal Credi	lit Union
activity, of all persons acting under the authority or on behalf of this committee in acting incurred any liabilities nor made any expendences on my behalf during this reporting	contributions and habitities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. Date: 6/19/2020 Cox only) Cox only) Cox only) Cox only Co
Candidate without Committee I certify that I have examined this report including ottached self-edules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of the	is candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penaltics of perjur:	Candidate's signature)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

1	Name and Residential Address		Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
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ine 9: Total Recei	pts over \$50 (or listed above)	\$0.00		
ine 10: Total Rece	ipts \$50 and under " (not listed above)	\$0.00		
ine 11, TOTAL D	LECEIPTS IN THE PERIOD	\$0.00 €	Enter on page 1, line 2	

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid			*******
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
/3/2020	Rockland Federal Credit Union	(41 Union Street Rockland, MA 02070	Check Order	\$61.9
/3/2020	David Blau	Jo Hi ching Post Drive Walpbie, MA 02(#11	Reimbursement for paying for political ad in Walpole Hometown Weekly	\$500.0
		A COURT OF THE PARTY OF T		
		Line 12: Total Expenditure	es over \$50 (or listed above)	\$561.5
	Line 13. Total appendaures \$50 and under* (not listed above)		s \$50 and under* (not listed above)	\$0.0
Enter on page 1, line 1 → wine 1 of TOTAL FORENDITURES IN THE PERIOD			\$561.59	

^{*} If you have itemized expenditors of \$50 and under neb de them in the 12 time 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made ir-ki. I contributions to more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line to on page 1.

Date Received	From Whom Received*	Residential Addre	ss Description of Contribution	Value
		Tables 12.31 (122) (12. ************************************		
		====================		
		Line 15.15-Kind contril	butions over \$50 (or listed above)	\$0.00
			outions \$50 & under (not listed above)	
	Enter on page 1, time 1 =-	11:0:17: [(*! \!.\s-K]	IND CONTRIBUTIONS	\$0.00

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^{*} If an in-kind contribution is received from a person of a reconstitute transfer of the contributor; in addition, it the contributor of the contributor occupation and employer.

SCHEDULE D: LINBILITIES

M.G.L. c. 55 requires committees to report 411, Cabolities which have the reported previously and are still outstanding, as well as those liabilities incurred during this reporting accord-

Date Incurred	Address	Purpose	Amount
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	- in 15: 7/11/AL 6: "STAN		\$0.00